COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"A BOTTOM-TO-SURFACE CONNECTION DEVICE INCLUDING A LEAKTIGHT FLEXIBLE JOINT BETWEEN A RISER AND A FLOAT""

on _ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Under 35	Claimed U.S.C. 119
FRANCE	03/09798	08.08.2003	[X] YES	[] NO
PCT	PCT/FR2004/001968	23.07.04	[X] YES	[] NO
		•	[] YES	[] NO
			[] YES	[] NO
	·	·	[] YES	[] NO
			[] YES	_ [] NO
			[] YES	[] NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at *Cohen, Pontani, Lieberman & Pavane* to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

Customer number 27799

Send correspondence to *Cohen, Pontani, Lieberman & Pavane* at the address for the following customer Number: 27799

Direct Telephone calls to: (name and telephone number) Martin B. Pavane (212) 687-2770

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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2	FULL NAME OF INVENTOR	FAMILY NAME STASSEN	FIRST GIVEN NAME Yves	SECO	ND GIVEN NAME
2 0 1	RESIDENCE, CITIZENSHIP	CITY ISSY LES MOULINEAUX	STATE OR FOREIGN COUNTRY FRANCE		ITRY OF CITIZENSHIP RANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 18 rue Vaudétard	CITY 92130 ISSY LES MOULINEAUX		E & ZIP CODE/COUNTRY 2130 FRANCE.
	FULL NAME OF INVENTOR	FAMILY NAME GASSERT	FIRST GIVEN NAME Michaël	SECO	ND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY LEVALLOIS PERRET	STATE OR FOREIGN COUNTRY FRANCE		TRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 19 rue Antonin Raynaud	CITY 92300 LEVALLOIS PERRET		E & ZIP CODE/COUNTRY 00 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME MOOG	FIRST GIVEN NAME Olivier	SECO	ND GIVEN NAME
2	RESIDENCE, CITIZENSHIP	CITY MULHOUSE	STATE OR FOREIGN COUNTRY FRANCE		NTRY OF CITIZENSHIP RANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 14, rue de l'Ours	CITY 68200 MULHOUSE		E & ZIP CODE/COUNTRY O FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME SKRABER	FIRST GIVEN NAME Alain	SECO	ND GIVEN NAME
}	RESIDENCE, CITIZENSHIP	CITY MASEVAUX	STATE OR FOREIGN COUNTRY FRANCE		NTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7, Place des Alliés	CITY 68290 MASEVAUX		E & ZIP CODE/COUNTRY 90 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECO	ND GIVEN NAME
)	RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	cour	NTRY OF CITIZENSHIP
,	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STAT	E & ZIP CODE/COUNTRY

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE 12/14/2005	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE

Additional inventor(s) name(s) & address(es) attached? [] Yes [X] No

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Customer number 27799

(212) 687-2770	following customer Number: 27799 (name a Mar	Telephone calls to: and telephone number) tin B. Pavane 2) 687-2770
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	FULL NAME OF INVENTOR	FAMILY NAME STASSEN	FIRST GIVEN NAME Yves	SECOND GIVEN NAME
2 0 1	RESIDENCE, CITIZENSHIP	CITY ISSY LES MOULINEAUX	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 18 rue Vaudétard	CITY 92130 ISSY LES MOULINEAUX	STATE & ZIP CODE/COUNTRY 92130 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME GASSERT	FIRST GIVEN NAME Michaël	SECOND GIVEN NAME
0 2	RESIDENCE, CITIZENSHIP	CITY LEVALLOIS PERRET	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 19 rue Antonin Raynaud	CITY 92300 LEVALLOIS PERRET	STATE & ZIP CODE/COUNTRY 92300 FRANCE
2	FULL NAME OF INVENTOR	FAMILY NAME MOOG	FIRST GIVEN NAME Olivier	SECOND GIVEN NAME
0 3	RESIDENCE, CITIZENSHIP	CITY MULHOUSE	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 14, rue de l'Ours	CITY 68200 MULHOUSE	STATE & ZIP CODE/COUNTRY 68200 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME SKRABER	FIRST GIVEN NAME Alain	SECOND GIVEN NAME
0 4	RESIDENCE, CITIZENSHIP	CITY MASEVAUX	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7, Place des Alliés	CITY 68290 MASEVAUX	STATE & ZIP CODE/COUNTRY 68290 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2 0 5	RESIDENCE, CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUNTRY

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 2027	SIGNATURE OF INVENTOR 203	
DATE	DATE 20.12.2005	DATE	
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206	
DATE	DATE	DATE	
Additional inventor(s) name(s) & address(es) attached? [] Yes [X] No			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at *Cohen, Pontani, Lieberman & Pavane* to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

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	FULL NAME OF INVENTOR	FAMILY NAME STASSEN	FIRST GIVEN NAME Yves	SECOND GIVEN NAME
0 1	RESIDENCE, CITIZENSHIP	CITY ISSY LES MOULINEAUX	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
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	FULL NAME OF INVENTOR	FAMILY NAME GASSERT	FIRST GIVEN NAME Michaël	SECOND GIVEN NAME
0 2	RESIDENCE, CITIZENSHIP	CITY LEVALLOIS PERRET	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 19 rue Antonin Raynaud	CITY 92300 LEVALLOIS PERRET	STATE & ZIP CODE/COUNTRY 92300 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME MOOG	FIRST GIVEN NAME Olivier	SECOND GIVEN NAME
0 3	RESIDENCE, CITIZENSHIP	CITY MULHOUSE	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 14, rue de l'Ours	CITY 68200 MULHOUSE	STATE & ZIP CODE/COUNTRY 68200 FRANCE
	FULL NAME OF INVENTOR .	FAMILY NAME SKRABER	FIRST GIVEN NAME Alain	SECOND GIVEN NAME
0 4	RESIDENCE, CITIZENSHIP	CITY BERRWILLER	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 13, rue de Cernay	CITY 68500 BERRWILLER	STATE & ZIP CODE/COUNTRY 68500 FRANCE
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 5	RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUNTRY

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203 OLIVIEK MOG
DATE	DATE	DATE 12.15. 2005
SIGNATURE OF INVENTOR 204 AGN SKRAGER	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE 12.15.2005	DATE	DATE
Additional inventor(s) name(s) & address(es) attached? [] Yes [X] No		

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Yves STASSEN.

Michael GASSERT Olivier MOOG Alain SKRABER

Serial No:

Filed:

For: A BOTTOM-TO-SURFACE CONNECTION DEVICE INCLUDING A LEAKTIGHT

FLEXIBLE JOINT BETWEEN A RISER AND A FLOAT

DECLARATION

I, Andrew Scott Marland, of 11, rue de Florence, 75008 Paris, France, declare that I am well acquainted with the English and French languages and that the attached translation of the French language PCT international application, Serial No. PCT/FR2004/001968 is a true and faithful translation of that document as filed.

All statements made herein are to my own knowledge true, and all statements made on information and belief are believed to be true; and further, these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any document or any registration resulting therefrom.

Date: January 10, 2006

Andrew Scott Marland